

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000057439

**Entity Name:** RESILIENCE & INTEGRAL HEALTH CARE , LLC

**Current Principal Place of Business:**

3717 CHIQUITA BLVD S  
CAPE CORAL, FL 33914

**Current Mailing Address:**

3717 CHIQUITA BLVD S  
CAPE CORAL, FL 33914

**FEI Number:** 85-0615728

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ASIN CALA, BARBARITO  
3717 CHIQUITA BLVD S  
CAPE CORAL, FL 33914 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ASIN CALA, BARBARITO  
Address 3717 CHIQUITA BLVD S  
City-State-Zip: CAPE CORAL FL 33914

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BARBARITO ASIN CALA

GM

04/12/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date